



ROLLOVER CONTRIBUTION REQUEST

To the Trustee of the City of Seattle Retirement Plan (A qualified plan under Internal Revenue Code section 401(a).)

Name (Please Print)

Address

Social Security Number

As a Participant in the above plan, I hereby make a "rollover contribution" in the cash amount of:

\$ _____

The rollover contribution satisfies the requirements of the following section of the Internal Revenue Code of 1986, as amended:

- | | |
|---|---|
| <input type="checkbox"/> §403(a) | <input type="checkbox"/> §408(d)(3) (previously a Conduit IRA) |
| <input type="checkbox"/> §403(b) | <input type="checkbox"/> §401(a) defined benefit plans |
| <input type="checkbox"/> §457 Governmental Plan | <input type="checkbox"/> §401(a) defined contribution plans |
| <input type="checkbox"/> IRA – Traditional | |

I certify that no amount in an account described in Code section 408(d)(3) is attributable to any source other than a rollover contribution from a qualified plan described in Code section 401(a). In addition, I certify the above amount does not include any amounts that have previously been taxed.

Dated this _____ day of _____, 20____.

Participant Signature

As Custodian/Trustee of the above-named Participant's IRA/Eligible Employer Plan, I hereby confirm the applicability of the designated Code section to the contribution described in this rollover contribution statement.

Dated this _____ day of _____, 20____.

Name of Custodian / Trustee

Signature of Custodian / Trustee

Only Direct Rollovers To The Plan Are Permitted.
Rollover Checks MUST Be Made Payable To: Seattle City Employees' Retirement System.

This completed form MUST be returned or we cannot accept the transfer.